ABANDONED

DECLARATION AND POWER OF ATTORNEY (NONPROVISIONAL APPLICATION)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

TAMPER RESISTANT CO-EXTRUDED DOSAGE FORM CONTAINING AN ACTIVE AGENT AND AN ADVERSE AGENT AND PROCESS OF MAKING SAME

APPLICATION SERIAL NO.

PCT/US04/041154

and i	or which a patent application:						
X	is attached hereto and include	es amendment(s) filed on (if ap	plicable)				
	was filed in the United States	s on as Application No. (for de	claration no	ot accompanying application)			
	with amendment(s) filed on						
X		al Application No. PCT/US04	/041154	on December 8, 2004 and was amen	nded under PC	Γ Article 19 o	n (if
applica		attornevs at Duane Morris LLI	P to inse	ert herein parentheses (Application N	lo.	filed)
the f	ling date and application num	ber of said application when k	nown.	ove identified application, including			
Regu	lations,§1.56.			ial to patentability as defined in Title			
certi	eby claim foreign priority bene ficate listed below and have al- e application on which priority	so identified below any foreig	ates Coo n applic	de, §119(a)-(d) of any foreign application for patent or inventor's certification	ation(s) for pate ate having a fil	ent or invento ing date befor	r's re that
	EARLIEST FOREIGN	APPLICATION(S), IF ANY	, FILED	PRIOR TO THE FILING DATE O	F THE APPLI	CATION	
A	PPLICATION NUMBER	COUNTRY		DATE OF FILING (day, month, year)	PRIOR	ITY CLAIM	ED _
					YES □	NO 🗆	
					YES □	NO 🗆	
I her	eby claim the benefit under Ti	tle 35, United States Code, §1	19(e) of	fany United States provisional applic	cation(s) listed	below.	
	PROVISIONAL APP	LICATION NUMBER		FILING	G DATE		
	60/52	28,550		Decembe	er 9, 2003		
matte parag as de	er of each of the claims of this graph of Title 35, United State	application is not disclosed in s Code §112, I acknowledge the eral Regulations, §1.56 which	the priche the duty	by United States application(s) listed or United States application in the material to disclose information known to mee available between the filing date of	anner provided which is mate	by the first rial to patenta	ability
	NON-PROVISIONAL	FILING DATE		STATU	S		

POWER OF ATTORNEY: As a named inventor, I hereby appoint Practitioners at Customer Number 42109, all of Duane Morris LLP, whose address is 380 Lexington Avenue, New York, New York 10168 and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

December 8, 2004

PATENTED

PENDING

XXX

DUANE MORRIS LLP DIRECT TELEPHONE CALLS TO:

SEND CORRESPONDENCE TO: 380 Lexington Avenue, New York, NY 10168
PTO Customer No. 42109 DUANE MORRIS DOCKETING
212-692-1863

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR	Flath	Robert	P.		
2	RESIDENCE &	сту	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
) !	CITIZENSHIP	Yonkers	NY	USA		
	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	15 Northview Place	Yonkers	NY	10703	
		SIGNATURE OF INVENTOR 201	20	DATE	j	
		The Pt	late	06/15/	2004	
	FULL NAME	LAST NAME	FIRST NAME			
	OF INVENTOR	Masselink	John	K.		
:	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
) !	CITIZENSHIP	Old Tappan	NJ	USA		
	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
	ADDRESS	7 Windsor Place	Old Tappan	NJ	07675	
		SIGNATURE OF INVENTOR 202	INVENTOR 202		DATE	
	THE MARKS	LAST NAME	FIRST NAME	MIDDLE NAME		
	FULL NAME OF INVENTOR					
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
	CITIZENSHIP					
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
		SIGNATURE OF INVENTOR 203		DATE		
		LAST NAME	FIRST NAME	MIDDLE NAME		
	FULL NAME OF INVENTOR			WARDEL WAYE		
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
	CITIZENSHIP					
	POST CERICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
	POST OFFICE ADDRESS					
		SIGNATURE OF INVENTOR 204		DATE		
	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
	OF INVENTOR					
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	нір	
	CITIZENSHIP					
5	POST OFFICE	STREET	СІТУ	STATE OR COUNTRY	ZIP CODE	
	ADDRESS					

YES 🗆

NO 🗆

DECLARATION AND POWER OF ATTORNEY (NONPROVISIONAL APPLICATION)

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TAMPER RESISTANT CO-EXTRUDED DOSAGE FORM CONTAINING AN ACTIVE AGENT AND AN ADVERSE AGENT AND PROCESS OF MAKING SAME

and for which a patent application:

of the application on which priority is claimed:

X	is attached hereto and includes amendment(s) filed on (if applicable)
	was filed in the United States on as Application No. (for declaration not accompanying application) with amendment(s) filed on (if applicable)
	was filed as PCT international Application No. PCT/US04/041154 on December 8, 2004 and was amended under PCT Article 19 on (if
I here	by authorize and request my attorneys at Duane Morris LLP to insert herein parentheses (Application No filed
I here	ing date and application number of said application when known. by state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any Iment referred to above
	nowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal ations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that

EARLIEST FOREIGN AP	PLICATION(S), IF ANY, FIL	ED PRIOR TO THE FILING DATI	E OF THE APPLIC	CATION
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED	
			YES □	NO □

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

FILING DATE
December 9, 2003

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS			
ATTEICATION SERIAL NO.		PATENTED	PENDING	ABANDONED	
PCT/US04/041154	December 8, 2004		XXX		

POWER OF ATTORNEY: As a named inventor, I hereby appoint Practitioners at Customer Number 42109, all of Duane Morris LLP, whose address is 380 Lexington Avenue, New York, New York 10168 and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

DUANE MORRIS LLP

SEND CORRESPONDENCE TO:

380 Lexington Avenue, New York, NY 10168
PTO Customer No. 42109

DIRECT TELEPHONE CALLS TO:
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		LAST NAME	FIRST NAME	AGDDI BALLAGO	
	FULL NAME OF INVENTOR	Flath	Robert	MIDDLE NAME	
2	OF INVENTOR	CITY		P.	
ō	RESIDENCE &	Yonkers	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	SHIP
1	CITIZENSHIP	STREET	NY	USA	
	POST OFFICE	15 Northview Place	СТҮ	STATE OR COUNTRY	ZIP CODE
	ADDRESS		Yonkers	NY	10703
		SIGNATURE OF INVENTOR 201		DATE	
	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME	
	OF INVENTOR	Masselink	John	K.	
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0 2		Old Tappan	NJ	USA	
_	POST OFFICE	STREET	ату	STATE OR COUNTRY	ZIP CODE
	POST OFFICE ADDRESS	7 Windsor Place	Old Tappan	NJ	07675
		SIGNATURE OF INVENTOR 202	= *		
	T	SIGNATURE OF INVENTOR 202 Waruling		6/19/06	
	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
2 0 3	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	стү	STATE OR COUNTRY	ZIP CODE
		SIGNATURE OF INVENTOR 203		DATE	
	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
2 0 4	RESIDENCE & CITIZENSHIP	ατγ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	сту	STATE OR COUNTRY	ZIP CODE
		SIGNATURE OF INVENTOR 204	-	DATE	
	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
2 0 5	RESIDENCE & CITIZENSHIP	СТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СІТУ	STATE OR COUNTRY	ZIP CODE
					